

Exercise 5:

Objective: Use the below information to complete Form 7: Statement of Financial Affairs.

Directions:

1. Click **New** to open the client list in Best Case Bankruptcy.
2. From the client list, select **New Client**.
3. From the list of exercises, select Exercise 5 and enter your name in the Index As field.
4. Open **Form 7: Statement of Financial Affairs**.
5. Double click on the category for each piece of pertinent information. Click **Insert** to insert a new entry for that SFA category and press **OK** to save.

Income information from Employment or Operation of Business:

	2012	2013	YTD	Source
John A. Education:	\$60,000.00	\$42,500.00	\$20,000.00	Rockford Medical Supplies
Jane B. Education:	\$16,000.00	\$16,938.00	\$5,573.00	North Shore Memorial Hospital

Payments to Creditors (within the last 90 Days):

Creditor Name and Address	Dates of Payment	Amount Paid	Amount Still Owing
Green Tree Attn: Officer or Agent PO Box 94710 Palatine, IL 60094-4710	1/10/2014, 2/10/2014, 3/15/2014	\$6,540.00	\$219,091.00
GMAC P.O. Box 9001719 Louisville, KY 40290-1719	1/4/2014, 2/24/2014, 3/15/2014	\$540.00	\$900.00
A-Z Auto Sales 2290 No Pone Road NW Georgetown, TN 37336	1/4/2014, 2/14/2014, 3/30/2014	\$1,306.71	\$13,067.10
Washington Mutual 5791 Brainerd Road Chattanooga, TN 37411	2/24/2014	\$190.00	\$10,390.00
Discover Card PO Box 15251 Wilmington, DE 19886-5251	1/12/2014	\$210.00	\$18,911.00
Capital One P.O. Box 85147 Richmond, VA 23276	3/3/2014	\$98.00	\$5,928.00

Gifts or Charitable Contributions:

Name and Address of Recipient	Dates of Gift	Description and Value of Gift
First Lutheran Church 4545 S Delaware Ave Washington, DC 20008	3/25/2014	\$120.00 donation made to church

Losses:

Description and Value of Property	Date of Loss	Description of Circumstances Surrounding Loss
\$750.00 Dell Laptop	11/24/2013	Stolen from parking lot at North Shore Memorial Hospital

Payments related to Debt Counseling or Bankruptcy:

Name and Address of Payee	Dates of Payment	Payment Amount
Abraham Lincoln, Attorney at Law 400 Illinois Ave Washington, DC 20002	1/15/2014	\$1800.00

Closed financial accounts:

Name and Address of Payee	Types of Account and Final Balance	Date of Closing
Washington Mutual 5791 Brainerd Road Chattanooga, TN 37411	Checking and Savings Account. Final Balance: \$3,400.00	11/24/2013

Safe deposit boxes:

Name and Address of Bank or Other Depository	Name and Address of Those with Access	Description of Contents
Washington Mutual 5791 Brainerd Road Chattanooga, TN 37411	John A Education Jane B Education	Miscellaneous Papers

Prior Address of Debtor:

Name and Addresses of Payee	Names Used	Dates of Residency
1542 Evergreen Lane Tempe, AZ 85281	John A. Education Jane B. Education	2/15/2006 - 1/29/2013